

ORDER REQUEST FORM



Please note: Your organization must have an approved ATCC account to place an order.

Distribution of ATCC materials in the United States and internationally is regulated by the U.S. Government. All orders are subject to applicable government regulations. All orders are subject to the terms and conditions of the ATCC Material Transfer Agreement (MTA), NCI Transfer Addendum, and Addendum to ATCC MTA for TERT Products, which are available by contacting **NCI-PBCFContract@atcc.org**

All information on this order form must be complete and legible.

ACCOUNT INFORMATION *required for order processing

Organization Name*			Order Date	
Purchase Order Number*			ATCC Account Number	
	Billing Address (Invoice	es will be sent to this addres	s)	
Contact Name (Complete first & last nam	e)			
Department	Building		Room Number	
Street Address/P.O. Box*	1			
City*	State*		Zip/Postal Code*	
Telephone*	Fax		E-mail (of contact name)*	
Shipp	ing Address (Complete stre	et address; PO Boxes are not	acceptable)	
Department	Building		Room Number	
Street Address (PO Boxes cannot be accep	oted)*			
City*	State*		Zip/Postal Code*	
Telephone*	Fax		E-mail*	
	Applicant Informat	ion (Primary Investigator)		
First Name*	Last Name*		Title	
Telephone*	Fax		E-mail*	
Address (Complete	the information below if your a	ddress is different than the ship	pping address listed above)	
Department	Building		Room Number	
Street Address*				
City*	State*		Zip/Postal Code*	
acknowledge that I have read and u ddendum and Addendum to ATCC		onditions of the ATCC Mater	। ial Transfer Agreement (MTA), NCI Transfe	
(X		
Primary Investigator (Print)		Primary Investigato	r's Signature and Date	



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PRODUCTS REQUESTED

Product Number	Description	Quantity	Reagent Kit (optional when ordering cell line) yes or no	Quantity (limit 1 per cell line ordered)

Please note that applicable fees for shipping and handling will be added by ATCC. Each Investigator is responsible for paying the costs associated with shipping and handling of the products.

FOB: Manassas, VA, USA Payment Terms: Net 30 Days

Reagent Kit contains the following:

Basal medium (e.g. RPMI 1640, DMEM)	Basal salts for cell propagation; to be used with FBS	
FBS (pre-qualified)	Supplement to basal medium for cell propagation	
PBS	Washing cells	
Trypsin (adherent cells only)	Subculturing of adherent cells	
DMSO	Cryopreserving cells	

Thank you for your order. Shipment is contingent upon confirmation of your customer account information and compliance with all applicable regulations and permit requirements. If an e-mail address is provided on this order form, a notice will be sent after your order has been processed and a sales order number has been confirmed.

The completed order form can be returned to Customer Services either by fax; our fax number is as a PDF to: NCI-PBCFContract@atcc.org